

## AMENDMENT / RESPONSE TRANSMITTAL

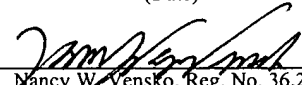
Applicant : Nabel et al.  
 App. No. : 09/913,909  
 Filed : August 17, 2001  
 For : IMMUNIZATION FOR  
 EBOLA VIRUS INFECTION  
 Examiner : Foley, Shannon A.  
 Art Unit : 1648

## CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

December 15, 2003

(Date)

  
 Nancy W. Vensko, Reg. No. 36,298

Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing in the above-identified application are the following enclosures:

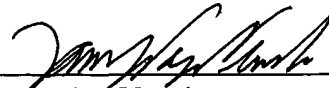
(X) Response to Restriction Requirement in 2 pages.

The fee has been calculated as shown below:

FEE CALCULATION				
FEE TYPE		FEE CODE	CALCULATION	TOTAL
Total Claims	37 - 37 = 0	1202 (\$18)	0 x 18 =	\$0
Independent Claims	5 - 5 = 0	1201 (\$86)	0 x 86 =	\$0
Multiple Claim		1203 (\$290)		\$0
1 Month Extension		1251 (\$110)		\$110
			<b>TOTAL FEE DUE</b>	<b>\$110</b>

- (X) An extension of time is hereby requested by payment of the appropriate fee indicated above.
- (X) A check in the amount of \$110 is enclosed.
- (X) Return prepaid postcard.

- (X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.



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Nancy W. Vensko  
Registration No. 36,298  
Attorney of Record  
Customer No. 20,995  
(805) 547-5580